



TCI MEDICAL WASTE DISPOSAL SERVICE

"EXCELLENCE IN WASTE DISPOSAL"

(909) 370-0730 FAX (909) 370-0163

2414 LAUREL STREET • COTTON, CA 92324

HAZARDOUS WASTE HAULER REGISTRATION # 1431

MEDICAL WASTE TRACKING DOCUMENT

GENERATOR NAME

TELEPHONE NUMBER

SUITE NO./STREET ADDRESS

CITY

DATE

TIME OF WASTE REMOVAL - GENERATOR SITE

TCL DRIVER

DATE 1-16-94 TIME OF WASH

1980-1981

ITEM	CONTAINER SERIAL NO.	COLUMN "A" WEIGHT	COLUMN "B" NET WT/LBS.	WASTE LEGEND	TRACKING INFORMATION
1	(<i>No waste</i>)			B <input type="checkbox"/> P <input checked="" type="checkbox"/> S <input type="checkbox"/> R <input checked="" type="checkbox"/> C <input type="checkbox"/>	Legend - Type of Medical Waste B - Biohazardous Waste (Red Bag and Sharps Waste) S - Sharps Waste Only C - Chemotherapy Waste (Trace) P - Path (Human Tissues) Waste R - Other/Special - See Remarks
2				B <input type="checkbox"/> P <input checked="" type="checkbox"/> S <input type="checkbox"/> R <input checked="" type="checkbox"/> C <input type="checkbox"/>	
3				B <input type="checkbox"/> P <input checked="" type="checkbox"/> S <input type="checkbox"/> R <input checked="" type="checkbox"/> C <input type="checkbox"/>	
4				B <input type="checkbox"/> P <input checked="" type="checkbox"/> S <input type="checkbox"/> R <input checked="" type="checkbox"/> C <input type="checkbox"/>	NOTE: Weights shown in Column "A" are reasonable estimates only, used for waste tracking document requirements, and cannot be used for invoicing purposes.
5				B <input type="checkbox"/> P <input checked="" type="checkbox"/> S <input type="checkbox"/> R <input checked="" type="checkbox"/> C <input type="checkbox"/>	NOTE: Weights shown in Column "B" is exact weight of waste (less tare weight of rigid container). Can be used for invoicing purposes. Weights are taken and determined at the T.C.I. Facility by a certified deputy weighmaster on weighmaster certified/permited scales.
6				B <input type="checkbox"/> P <input checked="" type="checkbox"/> S <input type="checkbox"/> R <input checked="" type="checkbox"/> C <input type="checkbox"/>	
7				B <input type="checkbox"/> P <input checked="" type="checkbox"/> S <input type="checkbox"/> R <input checked="" type="checkbox"/> C <input type="checkbox"/>	
8				B <input type="checkbox"/> P <input checked="" type="checkbox"/> S <input type="checkbox"/> R <input checked="" type="checkbox"/> C <input type="checkbox"/>	
9				B <input type="checkbox"/> P <input checked="" type="checkbox"/> S <input type="checkbox"/> R <input checked="" type="checkbox"/> C <input type="checkbox"/>	
10				B <input type="checkbox"/> P <input checked="" type="checkbox"/> S <input type="checkbox"/> R <input checked="" type="checkbox"/> C <input type="checkbox"/>	
11				B <input type="checkbox"/> P <input checked="" type="checkbox"/> S <input type="checkbox"/> R <input checked="" type="checkbox"/> C <input type="checkbox"/>	
12				B <input type="checkbox"/> P <input checked="" type="checkbox"/> S <input type="checkbox"/> R <input checked="" type="checkbox"/> C <input type="checkbox"/>	

REMARKS

EMPTY CONTAINERS

QTY

NO. 53049

(DATE WASTE WAS RECEIVED BY TREATMENT FACILITY)

MEDICAL WASTE TREATMENT BY
MEDICAL WASTE TSD FACILITY • THERMAL COMBUSTION INNOVATORS INC.
241 WEST LAUREL ST., COLTON, CA 92324 • EPA NO. CAD 981433873
WEIGHMASTER LICENSE NO. 6843

**CERTIFICATION OF MEDICAL WASTE TREATMENT/DISPOSAL
GENERATORS-COPY**